

Fill in this information to identify the case:

Debtor name P8H, Inc.
United States Bankruptcy Court for the: Southern District of New York
Case number (if known): 20-10809 (State)

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>9,904,727.58</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>9,904,727.58</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>8,538,992.20</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 6a of <i>Schedule E/F</i>	\$ <u>0.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 6b of <i>Schedule E/F</i>	+\$ <u>10,409,653.31</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>18,948,645.51</u>

Fill in this information to identify the case:

Debtor name P8H, Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number (if known): 20-10809

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ 0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. Wells Fargo (Receipt Acct)	Checking	____	\$ 640,176.13
3.2. See continuation sheet		____	\$ 119,261.29

4. Other cash equivalents (Identify all)

4.1. _____	\$ _____
4.2. _____	\$ _____

5. Total of Part 1

\$ 759,437.42

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit	
7.1. Lisa Cooley LLC (current landlord)	\$ 36,000.00
7.2. Security Deposit - Knotel Inc., 33 W. 17th Street, New York, NY 10011 (former landlord)	\$ 248,625.00

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8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 284,625.00

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**11a. 90 days old or less: 59,224.16 - 0.00 = → \$ 59,224.16
face amount doubtful or uncollectible accounts11b. Over 90 days old: 0.00 - 0.00 = → \$ 0.00
face amount doubtful or uncollectible accounts**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 59,224.16

Part 4: Investments**13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.**Valuation method
used for current value****Current value of debtor's
interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____ % _____ \$ _____

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

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Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
- ☒ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
Damaged goods returned and held by shipper's warehouse	_____	\$ _____	_____	55,000.00
	MM / DD / YYYY			\$ _____
23. Total of Part 5				\$ 55,000.00
Add lines 19 through 22. Copy the total to line 84.				

24. Is any of the property listed in Part 5 perishable?

- ☒ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples: Livestock, poultry, farm-raised fish</i>			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

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33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. Is the debtor a member of an agricultural cooperative?

- ☐ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☐ No
- ☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture Office Furniture	\$ _____	_____	\$ 2,500.00
40. Office fixtures Leasehold improvements	\$ _____	_____	\$ 54,646.00
41. Office equipment, including all computer equipment and communication systems equipment and software Computers	\$ _____	_____	\$ 35,000.00
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ 92,146.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
- ☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

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P8H, Inc.
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Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
49. Aircraft and accessories			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
	\$ _____	_____	\$ _____
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ _____

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Debtor

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Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
- ☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 Real Property Lease: Landlord is Lisa Cooley LLC. Premises: 107 Norfolk Street, New York NY 10002		\$ _____	_____	\$ 0.00
55.2		\$ _____	_____	\$ _____
55.3		\$ _____	_____	\$ _____
56. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.				\$ 0.00
57. Is a depreciation schedule available for any of the property listed in Part 9?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
58. Has any of the property listed in Part 9 been appraised by a professional within the last year?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets Paddle8 USPTO Registration No. 4730306	\$ _____	_____	Unknown
61. Internet domain names and websites www.paddle8.com	\$ _____	_____	Unknown
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations Customer List	\$ _____	_____	Unknown
64. Other intangibles, or intellectual property Trademark: Paddle8 USPTO Registration No. 4147463	\$ _____	_____	Unknown
65. Goodwill Good Will	\$ _____	_____	Unknown
66. Total of Part 10. Add lines 60 through 65. Copy the total to line 89.			\$ 0.00

Debtor

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67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

**Current value of
debtor's interest**

71. Notes receivable

Description (include name of obligor)

_____ — _____ = → \$ _____
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

Net Operating Losses

_____	Tax year 2019	\$ 8,654,295.00
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

_____ \$ _____

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 8,654,295.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Debtor

Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ 759,437.42	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 284,625.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 59,224.16	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 55,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ 92,146.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 0.00	
88. Real property. <i>Copy line 56, Part 9.</i> →		\$ 0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 8,654,295.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 9,904,727.58	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.	9,904,727.58	\$ 9,904,727.58

Debtor 1

P8H, Inc.

First Name

Middle Name

Last Name

Case number (if known)

Continuation Sheet for Official Form 206 A/B**3) Checking, savings, money market, or financial brokerage accounts****Signature Bank****Checking****Balance: 32,002.43****Wells Fargo
(Disbursement Acct.)****Checking****Balance: 87,258.86**

Fill in this information to identify the case:

Debtor name P8H, Inc.
 United States Bankruptcy Court for the: Southern District of New York
 Case number (if known): 20-10809

☐ Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.*Column A***Amount of claim**

Do not deduct the value of collateral.

*Column B***Value of collateral that supports this claim****2.1****Creditor's name**Stockaccess Holdings SAS**Describe debtor's property that is subject to a lien**\$ 8,538,992.20\$ 0.00**Creditor's mailing address**

c/o Morritt Hock & Hamroff Theresa Driscoll
400 Garden City Plaza, Garden City, NY 11

Describe the lien**Creditor's email address, if known****Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**

- ☒ No
☐ Yes. Specify each creditor, including this creditor,

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Is anyone else liable on this claim?

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

2.2**Creditor's name****Describe debtor's property that is subject to a lien**

\$ _____

\$ _____

Creditor's mailing address

Creditor's email address, if known**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**

- ☐ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

- ☐ Yes. The relative priority of creditors is specified on lines _____

Describe the lien**Is the creditor an insider or related party?**

- ☐ No
☐ Yes

Is anyone else liable on this claim?

- ☐ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.\$ 8,538,992.20

[illegible]

Fill in this information to identify the case:

Debtor P8H, Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number 20-10809
(If known)

☐ Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Total claim

Priority amount

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

2.2 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

2.3 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address A Hunk's New CLoths 859 N Orange Drive Los Angeles, CA, 90038 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>1,704.82</u>
3.2	Nonpriority creditor's name and mailing address Adam Gage 135F Grandview Ave Apt. 4F edison, NJ, 8837 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>18,710.00</u>
3.3	Nonpriority creditor's name and mailing address Adam Green 77 West 24th Street Apt 22E new york, NY, 10010 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>4,500.00</u>
3.4	Nonpriority creditor's name and mailing address Adam McDonald 156 Manor Drive North Worcester Park SRY KT4 7RU, GB Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>1,920.00</u>
3.5	Nonpriority creditor's name and mailing address Affordable Art 101 (c/o Roger Walton) 1113 Echo Pass Street Henderson, NV, 89052 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>850.00</u>
3.6	Nonpriority creditor's name and mailing address Aid for AIDS 131 Varick St #1011 new york, NY, 10013 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>8,231.25</u>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁷	Nonpriority creditor's name and mailing address Air Sea Packing Group, Inc 40-35 22nd Street Long Island City, NY, 11101 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,516.00
3. ⁸	Nonpriority creditor's name and mailing address Alan Zeng 41 Havemeyer St., Apt 3B brooklyn, NY, 11211 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,100.00
3. ⁹	Nonpriority creditor's name and mailing address Alexander Kirillov 28619 13th Avenue S Federal Way, WA, 98003 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,550.00
3. ¹⁰	Nonpriority creditor's name and mailing address alison hearst 2713 5th Avenue Fort Worth, TX, 76110 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,800.00
3. ¹¹	Nonpriority creditor's name and mailing address Andreas Stylianou Royal Oak Yard 502 Larch Court, London LND SE1 3GB Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 640.00

Part 2: Additional Page

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Amount of claim

3. ¹²	Nonpriority creditor's name and mailing address Arrow Fine Art Services 244 Bedford Avenue brooklyn, NY, 11249	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 315.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹³	Nonpriority creditor's name and mailing address Art Commerce, LLC 42 Commonwealth Drive Fairfield, CT, 6824	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 3,520.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁴	Nonpriority creditor's name and mailing address Art for Life Foundation PO Box 162 Clayton, CA, 94517	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 12,337.88
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁵	Nonpriority creditor's name and mailing address Art Issue Editions 1441 Third Avenue New York, NY, 10028	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 1,760.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁶	Nonpriority creditor's name and mailing address Art of Elysium 3278 Wilshire Blvd. Los Angeles, CA, 90010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 169.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3. ¹⁷	Nonpriority creditor's name and mailing address Art on a Postcard The Hepatitis C Trust 27 Crosby Row London SE1 3YD	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 79,948.11
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁸	Nonpriority creditor's name and mailing address Art Plug x Best Buddies Best Buddies 120 W 45th Street Suite 3800 New York, NY, 10036	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 24,057.17
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁹	Nonpriority creditor's name and mailing address Artnet Worldwide Corp 233 Broadway 26th Floor New York, NY, 10279	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,586.87
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ²⁰	Nonpriority creditor's name and mailing address As if x David Salle 26 Broadway 8th Floor New York, NY, 10004	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,112.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ²¹	Nonpriority creditor's name and mailing address Assaf Pocker 39802 Guita Ct Palmdale, CA, 93551	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 10,560.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3. ²²	Nonpriority creditor's name and mailing address Cadogan Tate Fine Art Los Angeles, Ltd 2645 Gundry Avenue Signal Hill Los Angeles, CA, 90755 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,840.00
3. ²³	Nonpriority creditor's name and mailing address Cadogan Tate Fine Art New York, Ltd 301 Norman Avenue Brooklyn, NY, 11222 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 163.94
3. ²⁴	Nonpriority creditor's name and mailing address California College of The Arts 1111 8th St Francisco, CA, 94107 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 24,502.42
3. ²⁵	Nonpriority creditor's name and mailing address California College of The Arts 1111 8th St San Fransico, CA, 94107 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 948.26
3. ²⁶	Nonpriority creditor's name and mailing address Cameron Williams 102 Breckenridge Drive Garner, NC, 27529 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,320.00

Part 2: Additional Page

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Amount of claim

3. ²⁷	Nonpriority creditor's name and mailing address Carol Lerdal 17 17th Avenue San Fransico, CA, 94121	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 1,600.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ²⁸	Nonpriority creditor's name and mailing address Christine Weller 13510 Lucca Drive Pacific Palisades, CA, 90272	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 46,920.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ²⁹	Nonpriority creditor's name and mailing address claudine ingeneri 27 West 72nd Street #207 New york, NY, 10023	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 1,200.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁰	Nonpriority creditor's name and mailing address Cloudinary, Ltd. 111 EVELYN AVENUE,SUITE #206 Sunnyvale, CA, 94086	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 1,218.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³¹	Nonpriority creditor's name and mailing address CORE x Let Love Rule Art Basel 6464 Sunset Blvd. Los Angelas, CA, 90028	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 13,055.95
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3. ³² Nonpriority creditor's name and mailing address

CT Corporation (Wolters Kluwer)
PO Box 4349

Carol Stream, IL, 60197

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 476.00

Basis for the claim: Credit Card Debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ³³ Nonpriority creditor's name and mailing address

DANNY CHANG
4191 E Fairview Ave

San Gabriel, CA, 91775

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 3,400.00

Basis for the claim: Credit Card Debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ³⁴ Nonpriority creditor's name and mailing address

David Dowd
2914 N Whipple Street

Chicago, IL, 60618

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 14,720.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ³⁵ Nonpriority creditor's name and mailing address

David Yamada
60 Broadway 4F

Brooklyn, NY, 11248

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 7,200.00

Basis for the claim: Credit Card Debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ³⁶ Nonpriority creditor's name and mailing address

Drew Wilson
735 Greenleaf Drive

Richardson, TX, 75080

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 850.00

Basis for the claim: Credit Card Debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

Part 2: Additional Page

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Amount of claim

3. ³⁷	Nonpriority creditor's name and mailing address Earl Heng Contemporary, LLC 1020 11th St. NE (c/o Earl Heng) Washington, DC, 20002	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 7,557.50
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁸	Nonpriority creditor's name and mailing address Ed Lewis 16 Linden Crescent, Lower Westwood Bradford-on-Avon Wiltshire BA15 2AN	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 800.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁹	Nonpriority creditor's name and mailing address Edita Zulic 1420 NW 20th Ave., Apt. 205 Portland, OR, 97209	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 4,522.75
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴⁰	Nonpriority creditor's name and mailing address Erik Ratensperger 570 Crane Blvd Los Angeles, CA, 90065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 3,645.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴¹	Nonpriority creditor's name and mailing address Ernst Haas Studio Inc. 1567 Lexington Avenue Apt 19 (c/o Victoria Haas) New York, NY, 10029	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 828.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

<p>3. ⁴² Nonpriority creditor's name and mailing address</p> <p>Fedex 5767-0560-3 P.O. Box 371461 Pittsburgh, PA, 15250</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 2,835.27</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Credit Card Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. ⁴³ Nonpriority creditor's name and mailing address</p> <p>FEDEX EXPRESS P.O. Box 371461 Pittsburgh, PA, 15250</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 14,255.43</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. ⁴⁴ Nonpriority creditor's name and mailing address</p> <p>Frank Schembri 83 Gary Place Staten Island, NY, 10314</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 8,280.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Credit Card Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. ⁴⁵ Nonpriority creditor's name and mailing address</p> <p>Franklin Street Works 41 Franklin St, Stamford, CT, 6901</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 9,166.25</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Credit Card Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. ⁴⁶ Nonpriority creditor's name and mailing address</p> <p>G4S International (USA) Inc. P.O. Box 9693 Uniondale, NY, 11555</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 10,059.73</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Part 2: Additional Page

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Amount of claim

3. ⁴⁷ Nonpriority creditor's name and mailing address G4S International Logistics (UK) Ltd GBP Princess House, Nobel Drive Hayes UB3 5EY UK	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 3,455.21
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴⁸ Nonpriority creditor's name and mailing address Gerald (Jerry) Blady 7489 S Albion st Centennial, CO, 80122	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 4,925.00
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴⁹ Nonpriority creditor's name and mailing address Gordon Films Inc. 369 Cornwell Ave (c/o Gary Conner) Malverne, NY, 11565	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 7,980.00
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁰ Nonpriority creditor's name and mailing address Greg Bell 1890 E Cayman Rd Vero Beach, FL, 32963	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 4,440.00
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵¹ Nonpriority creditor's name and mailing address Guild Hall of East Hampton 158 Main Street East Hampton, NY, 11937	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 2,788.50
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3. ⁵²	Nonpriority creditor's name and mailing address Hashtag Studio ul. Czerwonego Krzyża 6/22 Warszawa 00-377	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 107,205.00
Date or dates debt was incurred _____		Basis for the claim:	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵³	Nonpriority creditor's name and mailing address Hedges Company 524 W 24th St (c/o James R Hedges) New York, NY, 10011	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 13,300.00
Date or dates debt was incurred _____		Basis for the claim:	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁴	Nonpriority creditor's name and mailing address Henzel Studio Box 1117, 269 22 Bastad Sweden	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 334.00
Date or dates debt was incurred _____		Basis for the claim: Credit Card Debt	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁵	Nonpriority creditor's name and mailing address Henzel Studio x Goss Michael Foundation Goss Michael Foundation - 1305 Wycliff Ave #120 Dallas, TX, 75207	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 13,953.22
Date or dates debt was incurred _____		Basis for the claim: Credit Card Debt	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁶	Nonpriority creditor's name and mailing address Huw Lougher Contemporary Ltd 32 St Lucia Crescent Horfield Bristol BST BS70XR - GB	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 5,428.00
Date or dates debt was incurred _____		Basis for the claim: Credit Card Debt	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ⁵⁷	Nonpriority creditor's name and mailing address Ilya Sokolovski 7938 E. Vassar Dr. Denver, CO, 80231	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 8,000.00
3. ⁵⁸	Nonpriority creditor's name and mailing address Jan Endlich 4115 45th Street APT 6F Sunnyside, NY, 11104	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 800.00
3. ⁵⁹	Nonpriority creditor's name and mailing address Jane Glassman 8653 Metz Place c/o Jane Glassman Los Angeles, CA, 90069	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 880.00
3. ⁶⁰	Nonpriority creditor's name and mailing address jayson Lawfer 3717 N Ravenswood Ave #115W Chicago, IL, 60613	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 800.00
3. ⁶¹	Nonpriority creditor's name and mailing address Jeremy mariage 3275 5th avenue #502 San Diego, CA, 92103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 640.00

Part 2: Additional Page

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Amount of claim

3. ⁶²	Nonpriority creditor's name and mailing address Jessica van den Brand Goulburn Street 115/148 NSW Sydney 2010 Australia	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 625.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶³	Nonpriority creditor's name and mailing address Joni Sternbach 543 Union St Suite 3D Brooklyn, NY, 11215	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 1,190.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶⁴	Nonpriority creditor's name and mailing address Juan Carlos Bonete calle Santa Cecilia 10 Bajos 1 Barcelona CT 8014 ES	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 1,656.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶⁵	Nonpriority creditor's name and mailing address Julius Woeste Am Tannenbaum 11 Ratingen NW 40883 DE	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 2,320.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶⁶	Nonpriority creditor's name and mailing address Justin Durongsaeng 4 West 21st Street, Unit 5D New York, NY, 10010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 880.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3. ⁶⁷	Nonpriority creditor's name and mailing address Kelly Bitzer 530 Third Street Napa, CA, 94559 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,555.75
3. ⁶⁸	Nonpriority creditor's name and mailing address Kevin Wu 30 Dalton St. Apt. 704 Boston, MA, 21150 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 640.00
3. ⁶⁹	Nonpriority creditor's name and mailing address Knotel Inc. 30 Cooper Square 4th Floor New York, NY, 10003 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 276,250.00
3. ⁷⁰	Nonpriority creditor's name and mailing address Laura Schnaidt 101 Leonard Street 3A New York, NY, 10013 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 163.31
3. ⁷¹	Nonpriority creditor's name and mailing address LEO BARRERAS 2100 Linwood Avenue Apt # 11H Fort Lee, NY, 7024 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 5,790.00

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Amount of claim

3. ⁷² Nonpriority creditor's name and mailing address Leslie Meyers 24 West 55th St Apt 4D New york, NY, 10019 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,760.00
3. ⁷³ Nonpriority creditor's name and mailing address Lieberman Gallery 11 Cyprus Avenue London LND N3 1SS GB Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,275.00
3. ⁷⁴ Nonpriority creditor's name and mailing address Martin Podorsky 1100 N. Lake Shore Drive #30B Chicago, IL, 60611 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,400.00
3. ⁷⁵ Nonpriority creditor's name and mailing address Mathias De Soir 60 Broadway Apartment 4A Brooklyn, NY, 11249 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 800.00
3. ⁷⁶ Nonpriority creditor's name and mailing address Michael Lisi 648 Broadway Suite 201 New york, NY, 10012 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,880.00

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Amount of claim

3. ⁷⁷	Nonpriority creditor's name and mailing address Michigan Opera Theatre 1526 Broadway St Detriot, IL, 48226	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 2,362.49
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁷⁸	Nonpriority creditor's name and mailing address Miguel Soto 41 Calle Leon Aguadilla PR 603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 8,550.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁷⁹	Nonpriority creditor's name and mailing address Moises Preciado 16301 Chella Drive Hacienda Heights, CA, 91745	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 76,000.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁸⁰	Nonpriority creditor's name and mailing address Moses & Singer LLP The Chrysler Building 405 Lexington Ave New York, NY, 10174	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 8,899.96
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁸¹	Nonpriority creditor's name and mailing address Motoko Yorozu (BANJI) #205, 3-15-3 Takasu, Mihama-ku, Chiba-Shi Chiba 261-0004 JAPAN	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 110.20
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

<p>3. ⁸² Nonpriority creditor's name and mailing address</p> <p>Nat. Assoc. of Women 315 W 39th St #508 New York, NY, 10018</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 10,214.64</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Credit Card Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. ⁸³ Nonpriority creditor's name and mailing address</p> <p>New York State Sales Tax NYS Sales Tax Processing PO BOX 15168 Albany, NY, 12212</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 5,924.06</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Credit Card Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. ⁸⁴ Nonpriority creditor's name and mailing address</p> <p>Ortega y Gasset Projects 363 3rd Ave Brooklyn, NY, 11215</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 11,931.75</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. ⁸⁵ Nonpriority creditor's name and mailing address</p> <p>Pak Mail Centers of America, Inc. 7580 Metropolitan Dr. Ste #200 San Diego, CA, 92108</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 11,755.73</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. ⁸⁶ Nonpriority creditor's name and mailing address</p> <p>Panos Moraitis Meropis 15, Glifada 166 75, GR</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 2,720.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Credit Card Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3. ⁸⁷	Nonpriority creditor's name and mailing address Paul Simonetti 24017 Fulmar Ave. Torrance, CA, 90501	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 1,400.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁸⁸	Nonpriority creditor's name and mailing address Penumbra Foundation 36 E 30th St, New York, NY, 10016	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 14,300.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁸⁹	Nonpriority creditor's name and mailing address Peter McCourt 205 West 89th Street, #8S New York, NY, 10024	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 4,920.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹⁰	Nonpriority creditor's name and mailing address Picture This Publications Inc 54 W 89th St, c/o Marla Hamburg Kennedy New York, NY, 10024	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 8,820.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹¹	Nonpriority creditor's name and mailing address Plants Le Bacle 1625 Indian River Rd. Virginia Beach, VA, 23456	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 783.90
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ⁹²	Nonpriority creditor's name and mailing address Poppy Reindorp Cardboard Citizens 77A Greenfield Rd LND E1 1EJ GB	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,600.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹³	Nonpriority creditor's name and mailing address PureFreight, Inc. 8380 Santa Monica Blvd, SUite 201 West Hollywood, CA, 90069	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,692.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹⁴	Nonpriority creditor's name and mailing address RAHUL SABHNANI 485 Underhill Blvd Suite 207, Syosset, NY, 11791	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,995.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹⁵	Nonpriority creditor's name and mailing address RDS DELIVERY SERVICE 37-41 Vernon Blvd Long Island City, NY, 11101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 90.73
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹⁶	Nonpriority creditor's name and mailing address RECALL STUDIOS INC (The Native SA) 5550 GLADES RD STE 500 Boca Raton, FL, 33431	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 60,000.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ⁹⁷	Nonpriority creditor's name and mailing address Rema Hort Mann Foundation 153 Hudson St New York, NY, 10013 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 100,064.62
3. ⁹⁸	Nonpriority creditor's name and mailing address Rich & Bander Certified Public Accountants P.O. BOX 20455 GREELEY SQUARE STATION new york, NY, 10001 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,500.00
3. ⁹⁹	Nonpriority creditor's name and mailing address Richard White 5 Roland Gardens South Kensington London SW7 3PE GB Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,380.00
3. ¹⁰⁰	Nonpriority creditor's name and mailing address Ring Central Inc Dept. CH 19585 Palatine, IL, 60055 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,796.29
3. ¹⁰¹	Nonpriority creditor's name and mailing address Robb Report Media LLC DBA Curtco Robb Media LLC 11175 Santa Monica Blvd Los Angeles, CA, 90025 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,500.00

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Amount of claim

3. ¹⁰² Nonpriority creditor's name and mailing address Robert Lim 956 Corn Cob Ln Orange, CT, 6477	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 3,400.00
3. ¹⁰³ Nonpriority creditor's name and mailing address Rudy Esquivel Red Barn Green Farm LLC 2347 Oregon Terrace Rantoul, KS, 66079	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 7,820.00
3. ¹⁰⁴ Nonpriority creditor's name and mailing address Sam Sklar 2642 John R St. Detroit, IL, 48201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 11,960.00
3. ¹⁰⁵ Nonpriority creditor's name and mailing address Sands and Gill 192A Westbourne Park Road London LND W111BT GB	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 2,300.00
3. ¹⁰⁶ Nonpriority creditor's name and mailing address Scott Kaplan 37 Pool Drive Roslyn, NY, 11576	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 14,440.00

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Amount of claim

3. ¹⁰⁷	Nonpriority creditor's name and mailing address Selena Cerami 24 Keats Estate Kyverdale Road London LND N16 7AD	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,400.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰⁸	Nonpriority creditor's name and mailing address Silvereye Inc Via B. Passeri, 12 Rome 153 ITALY	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,360.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰⁹	Nonpriority creditor's name and mailing address Skate Free Art Basel 1035 North Miami Avenue SUITE 400, 1D Miami, FL, 33136	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,176.12
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹⁰	Nonpriority creditor's name and mailing address SOFTWARE MANSION NA ZJ E DZIE 11 P.9 KRAKÓW 30-527 POLAND	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,739.50
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹¹	Nonpriority creditor's name and mailing address Spectrum Business PO Box 742663 Cincinnati, OH, 45274	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 230.26
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹¹²	Nonpriority creditor's name and mailing address State of California Board of Equalization 450 N Street Sacramento, CA, 94279 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,689.88
3. ¹¹³	Nonpriority creditor's name and mailing address Stephen Bander 2333 Brickell Avenue, 4th Floor Apt. 2808 Miami, FL, 33129 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 960.00
3. ¹¹⁴	Nonpriority creditor's name and mailing address Steve Ramirez 95 Park Terrace East 1D New york, NY, 10034 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,400.00
3. ¹¹⁵	Nonpriority creditor's name and mailing address Stock Access Holdings SAS 12, rue de la Chaussée d'Antin, 75009, Paris, France Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 8,865,025.11
3. ¹¹⁶	Nonpriority creditor's name and mailing address Suleyman Azhari 30 Lorang Limau Manis 2 Bangsar Park Kuala Lumpur 11249 Malaysia Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,875.00

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹¹⁷	Nonpriority creditor's name and mailing address Tagboat, Inc. 3F 3-6-6 Nihonbashi-Ngyocho Chou-ku Tokyo 103-0023	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,562.50
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹⁸	Nonpriority creditor's name and mailing address Tactical Digital 241 West 37th Street; Suite 802 New York, NY, 10018	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,562.50
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹⁹	Nonpriority creditor's name and mailing address The Art Collection 33 Cuttermill Road Great Neck, NY, 11021	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,000.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹²⁰	Nonpriority creditor's name and mailing address The Art Design 9381 East Bay Harbor Drive Suite 703 c/o Juan Carlos Arcila-Duque N Bay Harbor Islands, FL, 33154	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 828.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹²¹	Nonpriority creditor's name and mailing address The Biebers x LIFT LA x Inner City Arts 720 Kohler Street Los Angeles, CA, 90021	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 73,073.57
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹²²	Nonpriority creditor's name and mailing address The Little Black Gallery Michelin House 81 Fulham Road London SW3 6RD	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 30,398.00
3. ¹²³	Nonpriority creditor's name and mailing address The Print Center 1614 Latimer Street Philadelphia, PA, 19103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 3,451.85
3. ¹²⁴	Nonpriority creditor's name and mailing address The Shawn Carter Foundation c/o Morrison, Brown, Argiz, & Farra LLC 1450 Brickell Ave, 18th Floor Miami, FL, 33131	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 65,191.00
3. ¹²⁵	Nonpriority creditor's name and mailing address The Skateroom Rue Du Mail 21 Brussels BRU 1050 BELGIUM	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 2,430.00
3. ¹²⁶	Nonpriority creditor's name and mailing address The Skateroom Rue Du Mail 21 1050 Ixelles Belgium	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 4,999.45

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹²⁷ Nonpriority creditor's name and mailing address The Wooden Box #W6-3 San Juan, PR, 00926 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 450.00
3. ¹²⁸ Nonpriority creditor's name and mailing address Titel Media UG Ritterstrasse 9 Berline 10969 Deutschland Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 10,000.00
3. ¹²⁹ Nonpriority creditor's name and mailing address Toni Garrn's Supermodel Flea Market Classens1eg 16 22391 Hamburg Germany Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 573.75
3. ¹³⁰ Nonpriority creditor's name and mailing address UN Women UK c/o Inspira UK Limited 1A Eastbury Road Northwood Middlesex, HA6 3BG Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 14,328.42
3. ¹³¹ Nonpriority creditor's name and mailing address Underdonk 197 Stockholm St. Apt 3R Brooklyn, NY, 11237 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 12,845.58

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹³² Nonpriority creditor's name and mailing address Venture Devs Inc 8605 Santa Monica Blvd, # 1950 West Hollywood, CA, 90069 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 16,000.00
3. ¹³³ Nonpriority creditor's name and mailing address Wise Engineering LLC Ukraine, Ternopil, 46011, Stepan Bandera Ave. 33, room 7 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 24,600.00
3. ¹³⁴ Nonpriority creditor's name and mailing address Workof 55 Prospect St, Brooklyn, NY, 11201 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,068.70
3. ¹³⁵ Nonpriority creditor's name and mailing address Yannick Lopez 71 Columbia Street Apt. 18E New York, NY, 10012 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 880.00
3. ¹³⁶ Nonpriority creditor's name and mailing address Your Special Delivery Service 647 W 27th Street 2nd Floor New York, NY, 10001 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,956.16

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts
5a. Total claims from Part 1	5a.	\$ 0.00
5b. Total claims from Part 2	5b. +	\$ 10,409,653.31
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ 10,409,653.31

Fill in this information to identify the case:

Debtor name P8H, Inc.
United States Bankruptcy Court for the: Southern District of New York
Case number (if known): 20-10809 Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Office Lease -107 Norfolk Street, New York, New York Lessor	Lisa Cooley LLC, 258 Wykoff St., #3 Brooklyn, NY, 11217
	State the term remaining	9/2022	
	List the contract number of any government contract		

2.2	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	

2.3	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	

2.4	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	

2.5	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	

Fill in this information to identify the case:

Debtor name P8H, Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number (If known): 20-10809

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case and this filing:

Debtor Name P8H, Inc.
United States Bankruptcy Court for the: Southern District of New York
Case number (If known): 20-10809

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/08/2020
MM / DD / YYYY

 /s/ Peter Rich

Signature of individual signing on behalf of debtor

Peter Rich

Printed name

Board Director

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name P8H, Inc.
United States Bankruptcy Court for the: Southern District of New York
Case number (if known): 20-10809

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2020 to Filing date
MM / DD / YYYY

☐ Operating a business
☐ Other

\$ 0.00

For prior year:

From 01/01/2019 to 12/31/2019
MM / DD / YYYY

☐ Operating a business
☐ Other

\$ 0.00

For the year before that:

From 01/01/2018 to 12/31/2018
MM / DD / YYYY

☐ Operating a business
☐ Other

\$ 17,536,353.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2020 to Filing date
MM / DD / YYYY

\$ 0.00

For prior year:

From 01/01/2019 to 12/31/2019
MM / DD / YYYY

\$ 0.00

For the year before that:

From 01/01/2018 to 12/31/2018
MM / DD / YYYY

\$ 0.00

Debtor P8H, Inc. Case number (if known) 20-10809
Name

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. To Be Provided Creditor's name		\$ 0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other
3.2. Creditor's name		\$	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name		\$	
Relationship to debtor			
4.2. Insider's name		\$	
Relationship to debtor			

 None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____		_____	\$ _____
5.2. Creditor's name _____		_____	\$ _____

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____		_____	\$ _____

Last 4 digits of account number: XXXX-_____

Part 3: Legal Actions or Assignments

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

7.1.	<div><div>Case title</div><div>The New American Cinema Group, Inc. v. P8H, Inc.</div></div>	<div><div>Nature of case</div><div></div></div>	<div><div>Court or agency's name and address</div><div>New York Supreme Court</div></div>	<div><div>Status of case</div><div><div><input checked="" type="checkbox"/> Pending</div><div><input type="checkbox"/> On appeal</div><div><input type="checkbox"/> Concluded</div></div></div>
	<div><div>Case number</div><div>651594/2020</div></div>		<div><div>New York County NY</div></div>	
7.2.	<div><div>Case title</div><div></div></div>		<div><div>Court or agency's name and address</div><div></div></div>	<div><div><div><input type="checkbox"/> Pending</div><div><input type="checkbox"/> On appeal</div><div><input type="checkbox"/> Concluded</div></div></div>

Debtor P8H, Inc. Case number (if known) 20-10809
Name

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address	Description of the property	Value
Custodian's name		\$
	Case title	Court name and address
	Case number	Name
	Date of order or assignment	

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$
Recipient's relationship to debtor			
9.2. Recipient's name			\$
Recipient's relationship to debtor			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
			\$

Debtor P8H, Inc. Case number (if known) 20-10809
Name

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Kirby Aisner & Curley LLP		3/16/2020	\$ 30,000.00
	Address 700 Post Road Suite 237 Scarsdale, NY 10583			

Email or website address

Who made the payment, if not debtor?

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.				\$
	Address			

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
			\$
Trustee			

Debtor P8H, Inc. Case number (if known) 20-10809
Name

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____		_____	\$ _____
Address _____			
Relationship to debtor _____			
13.2. _____		_____	\$ _____
Address _____			
Relationship to debtor _____			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy	
	From	To
14.1. 81 Prospect Street Brooklyn, NY	01/2017	01/2018
14.2. _____	_____	_____

Debtor P8H, Inc. Case number (if known) 20-10809
Name

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

15.1. Facility name

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically
☐ Paper

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

15.2. Facility name

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically
☐ Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
☐ Yes. State the nature of the information collected and retained.

Does the debtor have a privacy policy about that information?

- ☐ No
☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
Yes. Does the debtor serve as plan administrator?

- ☐ No. Go to Part 10.
☐ Yes. Fill in below:

Name of plan	Employer identification number of the plan
	EIN:

Has the plan been terminated?

- ☐ No
☐ Yes

Debtor P8H, Inc. Case number (if known) 20-10809
Name

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Name	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		\$
18.2.	Name	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		\$

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name			<input type="checkbox"/> No <input type="checkbox"/> Yes
Address			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name			<input type="checkbox"/> No <input type="checkbox"/> Yes
Address			

Debtor P8H, Inc. Case number (if known) 20-10809
Name

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			\$

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		

Debtor P8H, Inc. Case number (if known) 20-10809
Name

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Name		EIN: _____ Dates business existed From _____ To _____
25.2. Name		EIN: _____ Dates business existed From _____ To _____
25.3. Name		EIN: _____ Dates business existed From _____ To _____

Debtor P8H, Inc. Case number (if known) 20-10809
Name

26. **Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Dates of service
26a.1. Rich and Bander LLP, Name 79 Madison Ave., 5th Fl., NY, NY 10016	From _____ To _____

Name and address	Dates of service
26a.2. _____ Name	From _____ To _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Name and address	Dates of service
26b.1. _____ Name	From _____ To _____

Name and address	Dates of service
26b.2. _____ Name	From _____ To _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. _____ Name	

Debtor P8H, Inc. Case number (if known) 20-10809
Name

Name and address

If any books of account and records are unavailable, explain why

26c.2.

Name

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

26d.1.

Name

Name and address

26d.2.

Name

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

\$ _____

Name and address of the person who has possession of inventory records

27.1.

Name

Official Form 207 **Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy** page 13

Debtor P8H, Inc. Case number (if known) 20-10809
Name

Name and address of recipient

30.2

Name

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/08/2020
MM / DD / YYYY

X

/s/ Peter Rich

Printed name Peter Rich

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Board Director

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☒ Yes

Debtor Name P8H, Inc.

Case number (if known) 20-10809

Continuation Sheet for Official Form 207

28) Additional people in control of the debtor at the time of the filing of this case

Management Investment	,	1.01
-Class B		

ESOP - Class A	,	18.25
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29) Former partners

Isabella

Valentina

Norman